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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

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99 MAR 10 AM 9:36

SECRETARY OF STATE TALLAHASSEE, FLORIDA



DOCUMENT # F92000000881

1. Corporation Name MIPOD, INC.

Principal Place of Business ONE WESTBROOK CORPORATE CENTER, SUITE 400 WESTCHESTER IL 60154 Mailing Address ONE WESTBROOK CORPORATE CENTER, SUITE 400 WESTCHESTER IL 60154

2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt #, etc. 26 Suite, Apt #, etc. 22 City & State 27 City & State 23 Zip Country 28 Zip Country 24 25 29 30

9. Name and Address of Current Registered Agent YOUNG, PAUL E 1630 N FEDERAL HIGHWAY FORT LAUDERDALE FL 33305

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable

Table with 6 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and checkboxes for DELETED. Rows include MILTON PODOLSKY, RANDY D PODOLSKY, STEVEN PODOLSKY, BONNIE L PODOLSKY, and DEBRA J YAPELLI.

DO NOT WRITE IN THIS SPACE 3. Date Inc. incorporated or Qualified 12/15/1992 4. FEI Number 36-3043154 Applied for Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax [] Yes [] No 10. Name and Address of New Registered Agent

81 Name PAUL YOUNG 82 Street Address (P.O. Box Number is Not Acceptable) 1 EAST BROWARD BOULEVARD, SUITE 1300 83 84 City FORT LAUDERDALE FL 85 Zip Code 33301

3-8-99 DATE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

300002810983-0 -03/18/99-01088-012 Assistant ***300.00 ***150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed on an attachment with an address, with all other like empowered.

SIGNATURE: Debra J Yapelli SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/99 708-836-3844

CR2E034 (11/98)